



PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



<b>Applicant:</b> RUBIE, ERIC W. ET AL.	<b>Anticipated Examiner:</b> Cheryl L. Miller
<b>Serial No.:</b> To Be Assigned	
<b>Filed:</b> Herewith	<b>Anticipated Art Unit:</b> 3738
<b>For:</b> LOWER LEG PROSTHESIS	
	<b>Docket No.</b> 55508-301656

Mail Stop Patent Application  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

EXPRESS MAIL LABEL NO. EV314493547US

MARCH 19, 2004

**NEW CONTINUATION PATENT APPLICATION  
TRANSMITTAL**

Enclosed for filing pursuant to 37 C.F.R. 1.53(b), 1.63 and 1.78 are the following papers in connection with the above-identified continuation patent application:

1. Complete continuation patent application, including 15 pages of the specification, 6 pages of claims (1-50), 1 page abstract;
2. 5 sheets of drawings, including Figures 1 through 10 as described in the specification;
3. Fee Calculation Sheet (1 page);
4. Credit Card Payment Form in the amount of \$1,310.00 to cover the filing fee thereon;
5. Unsigned Combined Declaration and Power of Attorney;
6. Return postcard.

This application is a continuation of the application set forth immediately below:

**Particulars of Prior Application**

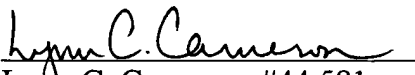
<b>Applicant:</b>	ERIC W. RUBIE, ET AL.
<b>Serial No.:</b>	09/781,570
<b>Filed:</b>	February 9, 2001
<b>For:</b>	LOWER LEG PROSTHESIS WITH LOW PROFILE
<b>Examiner:</b>	Cheryl L. Miller
<b>Group Art Unit:</b>	3738

In the event the amount submitted herewith is insufficient in any respect, the Commissioner is hereby authorized to charge the balance needed to our Deposit Account No. 06-0029 and is requested to notify us of the same.

Please place this application on file upon receipt with a filing date of March 19, 2004.

Respectfully Submitted,

ERIC W. RUBIE, ET AL.

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Dated: March 19, 2004

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## CLAIMS FEE CALCULATION CLAIMS AS FILED - PART I

	Number Filed		Number Extra	Rate	Basic Fee
					\$ 770
Total Claims	50	- 20 =	30	x \$ 18	\$ 540
Total Independent Claims	2	- 3 =	0	x \$ 86	\$ 0
Multiply Dependent Claims	0			\$ 290	\$ 0
				Total	\$ 1,310